

FORM PTO-1083



Case Docket No. 032026:0527

In re application of: Francisco Cerrina et al.

Serial No. 09/637,891

Filed: August 9, 2000

For: METHOD AND APPARATUS FOR SYNTHESIS OF ARRAYS OF DNA PROBES

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity under 37 CFR §1.9 and §1.27 is enclosed.

☐ No additional fee is required.

The filing fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	37	MINUS	37	= 0	x 9 =	\$		x 18 =	\$
INDEP.	2	MINUS	3	= 0	X 42 =	\$		x 84 =	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ 140 =	\$		+ 280 =	\$
					TOTAL	\$	OR	TOTAL	\$
					ADDIT. FEE				

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is attached.

☒ A check in the amount of \$ 55.00 is attached.

☒ Terminal Disclaimer is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2350. A duplicate copy of this sheet is attached.

☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.

☐ Any patent application processing fees under 37 CFR §1.17.

Please stamp the enclosed postcard with the filing date and serial number and return the same to me.

Respectfully submitted,

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